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DEPARTMENT USE ONLY

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PENNSYLVANIA CORPORATE TAX REPORT 2002

STEP A

Tax year beg	XX	01012002	Regulated Inv Co	XX	N	First Report	XX	N
Tax year end	XX	12312002	52-53 Week Filer	XX	N	Koz/EIP Credit	XX	N
			Address Change	XX	N	File Period Change	XX	N

STEP C

Pennsylvania Account ID	XX	3022580
Federal EIN	XX	251630212
Corporation Name	XX	WALTER BECK CORPORATION
Address line 1	XX	RAINBOW INN P O BOX 362
Address line 2	XX	
City	XX	LEWIS RUN
State	XX	PA
Zip	XX	16738

STEP D

A Tax Liability from Tax Report	B Estimated Payments and Credits on Deposit	C Restricted Credits	Calculation: A minus B minus C
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CS/FF	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LOANS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CNI	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

STEP E: PAYMENT

STEP F: Refund/Transfer Method

Select one of the following options:

- A Automatically transfer overpayment(s) to current tax period underpaid taxes and the remaining portion to the next tax period.
- B Automatically transfer this amount of the current tax period overpayment(s) to the next tax period after paying any current tax period underpaid taxes and refund the remaining portion of the current tax period overpayments. (Include amount)
- C Refund the overpayment from the current tax period after paying any current tax period underpaid taxes.

Made Payment Via EFT

N

A	N		
B	N	AMT	B
C	Y		<input type="checkbox"/>

I hereby affirm under penalties prescribed by law that this report (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete report. If prepared by a person other than the taxpayer, his declaration is based on all information of which he has any knowledge.

Corporate Officer Signature/Date	Phone Number	
Print Officer Name	E-Mail Address	
0		

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NAME WALTER BECK CORPORATION
 ACCOUNT ID 3022580 TAX YEAR END 12312002

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SECTION A: CS/FF

OLDEST PERIOD FIRST	TAX PERIOD BEGINNING	TAX PERIOD ENDING	BOOK INCOME			
YEAR 1	01011998	12311998	-20954	Investment in LLC	XX	N
YEAR 2	01011999	12311999	-9623	Holding Company	XX	N
YEAR 3	01012000	12312000	-9155	Family Farm	XX	N
YEAR 4	01012001	12312001	-3894			
YEAR 5	0	0	0			
YEAR 6	0	0	0			
YEAR 7	0	0	0			
CUR YR	01012002	12312002	-2683			
2 TOTAL			2		-46309	
3 DIVISOR			3		5.000	
4 AVERAGE BOOK INCOME			4		0	
5 SHAREHOLDERS' EQUITY at the end of the current period			5		-93893	
6 SHAREHOLDERS' EQUITY at the beginning of the current period			6		-91210	
7 NET WORTH (see instructions)			7		0	
8 CAPITAL STOCK VALUE (Worksheet 1)			8		0	
9 TAXABLE CAPITAL STOCK VALUE (line 8 x Schedule A-1 line 5)			9		0	
10 CAPITAL STOCK/FOREIGN FRANCHISE TAX			10		0	

SCHEMULE A-1 Apportionment Schedule for Capital Stock/Foreign Franchise Tax
(include Form RCT-102, RCT-105, or RCT-106)

1A Property Factor – Pennsylvania	1A	0		
1B Property Factor – Total	1B	0	1C	0.000000
2A Payroll Factor – Pennsylvania	2A	0		
2B Payroll Factor – Total	2B	0	2C	0.000000
3A Sales Factor – Pennsylvania	3A	0		
3B Sales Factor – Total	3B	0	3C	0.000000
4A Single Factor – Numerator	4A	0		
4B Single Factor – Denominator	4B	0		
5 Apportionment Proportion			5	0.000000

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SECTION B: Bonus Depreciation

1 Current Year Fed Depreciation of 168k Prop	1	0
2 Current Year Adj for Disposition of 168k Prop	2	0
3 Other Adjustments	3	0

(Must Attach Schedule C-3 if claiming bonus depreciation)

Business Trust	XX	N
Solicitation Only	XX	N
PA-S	XX	N
LLC	XX	N

SECTION C: CORPORATE NET INCOME TAX

1 Income or Loss from federal return on a separate company basis

1 -2683

2 DEDUCTIONS:

- A Corporate Dividends Received (From Schedule C-2, Line 6)
 - B Interest on U.S. Securities (**GROSS INT less EXPENSES**)
 - C Current Yr Additional PA Deprec plus Adjust for Sale (Att Schedule C-3)
 - D Other (Attached Schedule). See Instructions
- TOTAL DEDUCTIONS** — Sum of (A) through (D)

2A	0
2B	0
2C	0
2D	0
2	0

3 ADDITIONS:

- A Taxes imposed on or measured by net income (attached schedule)
 - B Tax Preference Items (Attached copy of Federal Form 4626)
 - C Employment Incentive Payment Credit Adjustment (Attached Schedule W)
 - D Current Year Bonus Depreciation (Attached Schedule C-3)
 - E Other (Attached Schedule). See Instructions
- TOTAL ADDITIONS** — Sum of (A) through (E)

3A	0
3B	0
3C	0
3D	0
3E	0
3	0

- 4 Income or Loss with Pennsylvania Adjustments (Line 1 - Line 2 + Line 3)
- 5 Total Nonbusiness Income (or Loss)
- 6 Income (or Loss) to be Apportioned (Line 4 - Line 5)
- 7 Income (or Loss) Apportioned to Pennsylvania (Line 6 x Schedule C-1 Line 5)
- 8 Nonbusiness Income (or Loss) allocated to Pennsylvania
- 9 Taxable Income (or Loss) after Apportionment (Line 7 + Line 8)
- 10 Total Net Operating Loss Deduction (from RCT-103) can not exceed \$2,000,000
- 11 Pennsylvania Taxable Income (or Loss) after Apportionment (Line 9 - Line 10)
- 12 Corporate Net Income Tax (Line 11 x .0999)

4	-2683
5	0
6	0
7	0
8	0
9	-2683
10	0
11	0
12	0

SCHEDULE C-1: Apportionment Schedule for Corporate Net Income Tax (include Form RCT-106)

1A Property Factor — Pennsylvania	1A	0		
1B Property Factor — Total	1B	0	1C	0.000000
2A Payroll Factor — Pennsylvania	2A	0	2C	0.000000
2B Payroll Factor — Total	2B	0		
3A Sales Factor — Pennsylvania	3A	0	3C	0.000000
3B Sales Factor — Total	3B	0		
4A Single Factor — Numerator	4A	0		
4B Single Factor — Denominator	4B	0	5	0.000000
5 Apportionment Proportion				

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SECTION D: LOANS TAX

- 1 Did this corporation have a fiscal officer resident in Pennsylvania and paying interest on indebtedness of the corporation? **NO**
 2 Did this corporation have indebtedness outstanding to individual residents and/or partnerships resident in Pennsylvania? **Y**
 3 Did this corporation have indebtedness outstanding held by a trustee, agent or guardian for a resident individual taxable in its own right or by an executor or administrator of an estate wherein the decedent was a resident of Pennsylvania? **N**

Interest Amount	Interest Rate	Taxable Value	TAX INDEBT	XX	□
□		□	TAX INDEBT	XX	□
□		□	LOANS TAX	XX	□
□		□			

SECTION E: CORPORATE STATUS CHANGES

Out of Existence (Final Report)	XX	N	Out of Existence Date	XX		
			Date of Distribution of Assets	XX	OR	No Assets to distribute
						XX

Pennsylvania corporations: Report date business activity ceased and date assets were distributed.

Foreign (non-Pennsylvania) corporations: Report date business activity in Pennsylvania ceased and date Pennsylvania assets were distributed.

Has the corporation sold or transferred in bulk 51% or more of any of the following classes of assets:
 any stock of goods, wares, merchandise of any kind, fixtures, machinery, equipment, buildings or real estate.
 If so, please provide the name and address of the purchaser.

XX NO

Purchaser name
 Address line 1
 Address line 2
 City
 State
 Zip

SECTION F: GENERAL INFORMATION QUESTIONNAIRE

Brief Description of corporate activity
 in Pennsylvania RESTAURANT AND BAR

Brief Description of corporate activity
 outside of Pennsylvania N / A

List other states in which taxpayer
 has activity NONE

Is the corporation incorporated under the laws
 of the Commonwealth of Pennsylvania? Y

If incorporated outside of Pennsylvania, does
 the corporation solicit sales in Pennsylvania? If yes, does the
 corporation use:
 Employee
 Exclusive sales representative
 Independent sales representative

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- 1 Has federal government changed taxable income as originally reported for any prior period for which reports of change have not been filed in Pennsylvania? N0 First period end date:
 Last period end date:
- 2 Does any corporation hold all or a majority of the stock of this corporation? N
- 3 Does this corporation own all or a majority of stock in other corporations? N If yes, complete Schedule X.

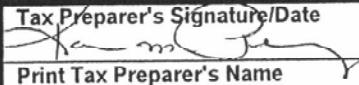
SCHEDULE OF REAL PROPERTY IN PENNSYLVANIA

Own/Rent	Street Address	City	County	KOZ/KOEZ
RENT		LEWIS RUN	MCKEAN	N

CORPORATE OFFICERS	Last Name	First Name	MI	SSN
President	XX			
Vice President	XX			
Secretary	XX			
Treasurer	XX			

TAX PREPARER'S NAME AND ADDRESS

Mail to Practitioner	XX	Y
Federal EIN	XX	161473170
Name	XX	KAREN M. PERRIGO, CPA
Address Line 1	XX	20 WATER STREET
Address Line 2	XX	
City	XX	CUBA
State	XX	NY
Zip	XX	14727

Tax Preparer's Signature/Date 	07/09/03	Phone Number (716) 968-5292	
Print Tax Preparer's Name KAREN M. PERRIGO		E-Mail Address	

USE WHOLE DOLLARS ONLY FOR ALL MONETARY AMOUNTS